



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/612,834
	Filing Date	June 30, 2003
	First Named Inventor	Ashay A. Dani
	Art Unit	3744
	Examiner Name	FLANIGAN, ALLEN J
	Attorney Docket Number	P16924
Total Number of Pages in This Submission		14

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input checked="" type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Petition to Revive (2 pgs.), Identification of Drawings Deficiencies (3 pgs), Replacement Figures (7 pgs) & a return postcard.
<b>Remarks</b> Authorization to charge the Deposit Account 50-0221 in the amount of \$1,620.00 for the Petition to Revive an Unintentionally Abandoned Application.  Authorization to charge and/or credit the Deposit Account 50-0221 for any underpayments or overpayments.  CUSTOMER NUMBER: 59796		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	CUSTOMER NUMBER: 59796		
Signature			
Printed name	John N. Greaves		
Date	January 15, 2009	Reg. No.	40,362

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature	/Kyrstin Ryan/		
Typed or printed name	Kyrstin Ryan	Date	January 15, 2009

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number

Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2009

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1620.00

### Complete if Known

Application Number	10/612,834
Filing Date	June 30, 2003
First Named Inventor	Ashay A. Dani
Examiner Name	June 30, 2003
Art Unit	3744
Attorney Docket No.	P16924

### METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 50-0221 Deposit Account Name: Intel Corporation

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

#### 2. EXCESS CLAIM FEES

##### Fee Description

Each claim over 20 (including Reissues)

Fee (\$)	Small Entity Fee (\$)
52	26
220	110
390	195

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims Extra Claims Fee (\$) Fee Paid (\$)

- 20 or HP = x =

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)

- 3 or HP = x =

HP = highest number of independent claims paid for, if greater than 3.

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)

- 100 = / 50 = (round up to a whole number) x =

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Petition to Revive Unintentionally Abandoned Application 1620.00

### SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	40,362	Telephone	503-712-3485
Name (Print/Type)	John N. Greaves			Date	January 15, 2009

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
www.uspto.gov

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/612,834	06/30/2003	Ashay A. Dani.	884.945US1	3862

  

59796	7590	09/23/2008
INTEL CORPORATION c/o INTELLEVATE, LLC P.O. BOX 52050 MINNEAPOLIS, MN 55402		

  

EXAMINER	
FLANIGAN, ALLEN J	

  

ART UNIT	PAPER NUMBER
3744	

  

MAIL DATE	DELIVERY MODE
09/23/2008	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.



UNITED STATES PATENT AND TRADEMARK OFFICE

Commissioner for Patents  
United States Patent and Trademark Office  
P.O. Box 1450  
Alexandria, VA 22313-1450  
www.uspto.gov

Serial No. : 10/612834  
Applicant: Dani  
Filing Date : 06/30/03  
Date Mailed : 09/23/08

## NOTICE TO FILE CORRECTED APPLICATION PAPERS

### *Notice of Allowance Mailed*

This application has been accorded an Allowance Date and is being prepared for issuance. The application, however, is incomplete for the reasons below.

Applicant is given 2 months from the mail date of this Notice within which to correct the informalities indicated below. If the informality pertains to the abstract, specification (including claims) or drawings, the informality must be corrected with an amendment in compliance with 37 CFR 1.121 (or, if the application is a reissue application, 37 CFR 1.173). Such an amendment may be filed after payment of the issue fee if limited to correction of informalities noted herein. See Waiver of 37 CFR 1.312 for Documents Required by the Office of Patent Publication, 1280 Off. Gaz. Patent Office 918 (March 23, 2004). In addition, if the informality is not corrected until after payment of the issue fee, for purposes of 35 U.S.C. 154(b)(1)(iv), "all outstanding requirements" will be considered to have been satisfied when the informality has been corrected. A failure to reply will result in the application being ABANDONED. This period for reply is NOT extendable under 37 CFR 1.136(a).

See attachment.

**all drawings have handwritten data. Faded/unreadable data. Please provide replacement drawings.**

*A copy of this notice **MUST** be returned with the reply. Please address response to  
"Mail Stop Issue Fee, Commissioner for Patents,  
P.O. Box 1450, Alexandria, VA 22313-1450".*

**L. Fletcher** \_\_\_\_\_

Your name

Office of Patent Publication

Phone: 703-308-9250, ext. 143



Application No. 10/612834 \_\_\_\_\_ Drawings filed 06/30/03 \_\_\_\_\_

### IDENTIFICATION OF DRAWING DEFICIENCIES

- ☐ There is a hole or the image thereof within the illustration. FIG(s) \_\_\_\_\_
- ☐ The character of the lines, numbers and letters is poor. FIG(s) \_\_\_\_\_
- ☐ The illustration is penetrated or traversed by a solid or broken line that is not intended to be part of the drawing, such as a dark line caused by a flaw in the copying process. FIG(s) \_\_\_\_\_
- ☐ An ink stamp or an image obscures part of the illustration. FIG(s) \_\_\_\_\_
- ☐ The drawing is marred by black smudges, obliterations, or fax/copier marks. FIG(s) \_\_\_\_\_
- ☐ Figure numbers are duplicated or missing. FIG(s). \_\_\_\_\_
- ☐ Numbers, letters, or reference characters in the drawing have been crossed out by hand or are illegibly handwritten. FIG(s) \_\_\_\_\_
- ☐ The drawing's background shows that the original drawing was made on graph paper or other paper with a pattern or decoration. FIG(s) \_\_\_\_\_
- ☐ The FIG. number label is placed in a location that causes the drawing to be read upside down. FIG(s) \_\_\_\_\_
- ☐ Data, a reference number, or part of the drawing is truncated or missing. FIG(s) \_\_\_\_\_
- ☐ The drawing is continued onto a second page (or more) without proper labeling under 37 CFR 1.84(u)(1). FIG(s) \_\_\_\_\_
- ☐ The drawing and/or the FIG. label contain(s) foreign language. FIG(s) \_\_\_\_\_
- ☐ Color drawings are present in this application but the following 37 CFR 1.84(a) requirements have not been met\*:
  - ☐ Petition filed
  - ☐ Petition fee
  - ☐ 3 sets of color drawings
  - ☐ Color drawing paragraph

\*If color drawings are not elected, then applicant **must respond** so stating. Also, references to color drawings in the specification, if any, must be amended.381.

**COMMENTS: all drawings have handwritten data. Faded/unreadable data. Please provide replacement drawings.**